Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	-	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Jerome First name Kenneth Middle name Cabell, Jr. Last name and Suffix (Sr., Jr., II, III)	Yolanda First name Danielle Middle name Cabell Last name and Suffix (Sr., Jr., II, III)
	meeting with the trustee.	Zast Hallie and Sallik (O., O., II, III)	Zaot name and Gamx (Gr., Gr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3047	xxx-xx-6172

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)			
	doing business as names					
		EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		4065 Hereford St. Detroit, MI 48224				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Wayne				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	otor 2	Yolanda Danielle					Case number (if known)	
Par	t 2:	Tell the Court About \	Your Bankı	runtev C:	250			
7.	The	chapter of the	Check on	e. (For a l			by 11 U.S.C. § 342(b) for Individuals Filing for Bankrupt	су
		sing to file under	<u>.</u>	.,	go to the top of page 1 at	ій спеск ше арргорі	ale DOX.	
			■ Chapt					
			☐ Chapt					
			☐ Chapt					
			☐ Chapt	ei is				
8.	How	you will pay the fee	abo ord	ut how yo	ou may pay. Typically, if you attorney is submitting you	ou are paying the fee	eck with the clerk's office in your local court for more do yourself, you may pay with cash, cashier's check, or m shalf, your attorney may pay with a credit card or check	oney
							tion, sign and attach the Application for Individuals to I	Pay
				U	ee in Installments (Official at my fee be waived (You	,	ion only if you are filing for Chapter 7. By law, a judge i	mav
			but app	is not req lies to yo	uired to, waive your fee, a ur family size and you are	nd may do so only if unable to pay the fee	your income is less than 150% of the official poverty line in installments). If you choose this option, you must fil fficial Form 103B) and file it with your petition.	ne that
9.		you filed for	■ No.					
		ruptcy within the 3 years?	☐ Yes.					
		, ,	ப 103.	District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		iny bankruptcy	■ No					
	filed not fi you,	s pending or being by a spouse who is ling this case with or by a business ler, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your ence?	■ No.	Go to	line 12.			
			☐ Yes.	Has yo	our landlord obtained an e	viction judgment agai	nst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Stater</i> this bankruptcy petition.	nent About an Evictio	n Judgment Against You (Form 101A) and file it as par	t of

	tor 1 Jerome Kenneth C tor 2 Yolanda Danielle C		•		Case number (if known)	
Part	Report About Any Bu	ısinesses	You Own	as a Sole Proprieto	or .	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of busing	ness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code	
	it to this petition.		Checi	k the appropriate box	to describe your business:	
	·			Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))	
			_	Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				•	fined in 11 U.S.C. § 101(53A))	
					(as defined in 11 U.S.C. § 101(6))	
				None of the above	(40 4511104111 1 515101 3 101(0))	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation in 11 U.S	s. If you in is, cash-fl i.C. 1116(ndicate that you are a ow statement, and fe 1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure of the second statement of the s	f
	For a definition of small	No.	ı am r	not filing under Chapt	er i i.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.		1, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.	nd
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, ar Subchapter V of Chapter 11.	nd
Part	Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention	
14.	Do you own or have any property that poses or is	■ No.				
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
					Number, Street, City, State & Zip Code	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 Jerome Kenneth (Yolanda Danielle	,		Case	number (if known)			
Par	t 6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		siness debts? Business debts are the three				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you ow	ve that are not consumer debts or b	ousiness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		o you estimate that after any exempliable to distribute to unsecured cre	ot property is excluded and administrated tors?	ative expenses		
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	□ 1-49		1 ,000-5,000	2 5,001-50,000			
	you estimate that you owe?	50-99		☐ 5001-10,000 ☐ 40,004.05.000	☐ 50,001-100,000			
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 bill			
	be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million		O DIIIION		
20.	How much do you estimate your liabilities	□ \$0 - \$£		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 bill			
	to be?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million				
Par	t 7: Sign Below							
For	you	I have ex	amined this petition, and I decla	are under penalty of perjury that the	e information provided is true and corr	rect.		
					ligible, under Chapter 7, 11,12, or 13 and I choose to proceed under Chapte			
				ot pay or agree to pay someone wh notice required by 11 U.S.C. § 342	o is not an attorney to help me fill out 2(b).	this		
		I request	relief in accordance with the ch	napter of title 11, United States Coo	le, specified in this petition.			
			I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571					
		/s/ Jerone	me Kenneth Cabell, Jr. Kenneth Cabell, Jr. e of Debtor 1		a Danielle Cabell anielle Cabell Debtor 2			
		Executed	on February 26, 2020	Executed or	February 26, 2020			

Debtor 1	Jerome Kenneth Cabell, Jr.	
Debtor 2	Yolanda Danielle Cabell	

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Marshall D. Schultz	Date	February 26, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Marshall D. Schultz P38040		
Printed name		
Law Offices of Marshall D. Schultz Firm name		
29777 Telegraph Road, Suite 2203		
Southfield, MI 48034		
Number, Street, City, State & ZIP Code		
Contact phone 248-559-6930	Email address	marshalld.schultz@gmail.com
P38040 MI		
Bar number & State		

Fill in this infe	ormation to identify your case:		
Debtor 1	Jerome Kenneth Cabell, Jr.		
Debtor 2	First Name Middle Name Last Name Yolanda Danielle Cabell		
(Spouse if, filing)	First Name Middle Name Last Name		
United States	Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN		
Case number			
(if known)		_	Check if this is an amended filing
Official F	Form 106Sum		
Summary	of Your Assets and Liabilities and Certain Statistical Information		12/15
information. F your original f	te and accurate as possible. If two married people are filing together, both are equally responsible for ill out all of your schedules first; then complete the information on this form. If you are filing amend forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. Inmarize Your Assets		
			our assets alue of what you own
1. Schedule 1a. Copy	e A/B: Property (Official Form 106A/B) line 55, Total real estate, from Schedule A/B	Ş	60,000.00
1b. Copy	line 62, Total personal property, from Schedule A/B	9	28,061.00
1с. Сору	line 63, Total of all property on Schedule A/B	9	88,061.00
Part 2: Sun	nmarize Your Liabilities		
			our liabilities mount you owe
	e D: Creditors Who Have Claims Secured by Property (Official Form 106D) the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Ç	38,788.55
	e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Ş	809.00
3b. Copy	the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		344,404.00
	Your total liabilities	\$_	384,001.55
Part 3: Sun	nmarize Your Income and Expenses	1	
	e I: Your Income (Official Form 106I) ur combined monthly income from line 12 of Schedule I	Ş	5,219.87
	e J: Your Expenses (Official Form 106J) ur monthly expenses from line 22c of Schedule J	9	5,200.00
Part 4: Ans	swer These Questions for Administrative and Statistical Records		
-	filing for bankruptcy under Chapters 7, 11, or 13? You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur oth	er schedules.
Yes 7. What kin	nd of debt do you have?		
■ You	ur debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a ner	sonal family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,673.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
, , ,	•	0.00
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	809.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	292,184.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	292,993.00

Best Case Bankruptcy

	ormation to identify your case and the	nis filing:		
Debtor 1	Jerome Kenneth Cabell, Jr			
Debtor 2	Yolanda Danielle Cabell	e Name Last Name		
Spouse, if filing)		e Name Last Name		
United States I	Bankruptcy Court for the:EASTERN	DISTRICT OF MICHIGAN		
Case number				☐ Check if this is ar amended filing
Official E	orm 106A/B			
	lle A/B: Property			12/15
nink it fits best. nformation. If m nswer every qu	Be as complete and accurate as possible ore space is needed, attach a separate suestion.	an asset only once. If an asset fits in more than one ile. If two married people are filing together, both are sheet to this form. On the top of any additional pages	equally responsible for s	upplying correct
	, ,	ther Real Estate You Own or Have an Interest In		
_		any residence, building, land, or similar property?		
_	Go to Part 2.			
■ Yes.	Where is the property?			
		W		
	veford St	What is the property? Check all that apply		
4065 He	ereford St. ss, if available, or other description	Single-family home	Do not deduct secured cl	
4065 He				ed claims on Schedule D:
4065 He		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clair	ed claims on <i>Śchedule D:</i> ims Secured by Property.
4065 He		■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land	the amount of any secure Creditors Who Have Clair Current value of the entire property?	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
4065 He Street addres	ss, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
4065 He Street addres	ss, if available, or other description MI 48224-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property? \$60,000.00 Describe the nature of y (such as fee simple, ter	Current value of the portion you own? \$60,000.00 your ownership interest
4065 He Street addres	ss, if available, or other description MI 48224-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current value of the entire property? \$60,000.00 Describe the nature of years.	Current value of the portion you own? \$60,000.00 your ownership interest nancy by the entireties, or
4065 He Street addres	ss, if available, or other description MI 48224-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$60,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$60,000.00 your ownership interest nancy by the entireties, or
4065 He Street addres	ss, if available, or other description MI 48224-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$60,000.00 Describe the nature of (such as fee simple, ter a life estate), if known. Equitable title as L	Current value of the portion you own? \$60,000.00 your ownership interest nancy by the entireties, or
Street address Detroit City	ss, if available, or other description MI 48224-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$60,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Equitable title as L Vendee	Current value of the portion you own? \$60,000.00 your ownership interest nancy by the entireties, or and Contract
Detroit City Wayne	ss, if available, or other description MI 48224-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$60,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Equitable title as L Vendee	Current value of the portion you own? \$60,000.00 your ownership interest nancy by the entireties, or and Contract
Detroit City Wayne	ss, if available, or other description MI 48224-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this iter	Current value of the entire property? \$60,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Equitable title as L Vendee	Current value of the portion you own? \$60,000.00 your ownership interest nancy by the entireties, or and Contract

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor Debtor			neth Cabell, Jr. nielle Cabell		Case n	umber (if known)	
3. Cars	s, vans,	trucks, trac	tors, sport utility v	ehicles, motorcycles			
□ No							
	Make: Model:	Chrysler Pacifica		Who has an interest in the	property? Check one	the amount of any se	ed claims or exemptions. Put accured claims on Schedule D: Claims Secured by Property.
		2017 nate mileage:		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 on ☐ At least one of the debtor	ly	Current value of the entire property?	e Current value of the portion you own?
				Check if this is communicate (see instructions)	nity property	\$17,000.0	\$17,000.00
.pag Part 3:	Descri	have attach	ed for Part 2. Write	wn for all of your entries fro that number here tems nterest in any of the followin			\$17,000.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
Exa □ N	amples: No	goods and Major appliar	nces, furniture, linen	s, china, kitchenware			Samo S. Stori Patrici.
			to, small applia	ld goods and furnishing ances, bedding, kitchenv lies, assorted household ure, lamps, and decorati	vare and supplies, clear d tools, furnishings,	ning	\$4,000.00
Exa	No	Televisions a		deo, stereo, and digital equipr media players, games	nent; computers, printers, so	canners; music coll	ections; electronic devices
			phones, comp	uter, 2 televisions			\$1,800.00
Exa	amples: No		l figurines; paintings ons, memorabilia, co	, prints, or other artwork; book ollectibles	ks, pictures, or other art obje	ects; stamp, coin, o	r baseball card collections;

Debtor Debtor		neth Cabell, Jr. nielle Cabell Case number (i	if known)
Exa	musical instr	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
■ N □ Y	o es. Describe		
■ N	amples: Pistols, rifle	s, shotguns, ammunition, and related equipment	
□ N	amples: Everyday cl	othes, furs, leather coats, designer wear, shoes, accessories	
		clothing and shoes	\$1,000.00
■ N □ Y 13. Nor Exc	amples: Everyday je o es. Describe n-farm animals amples: Dogs, cats,	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	gems, gold, silver
– Y	es. Describe	3 dogs	\$0.00
■ N		d household items you did not already list, including any health aids you did no ormation	ot list
		of all of your entries from Part 3, including any entries for pages you have attac number here	shed \$6,800.00
	Describe Your Finan own or have any l	cial Assets egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
ПΝ	amples: Money you o	have in your wallet, in your home, in a safe deposit box, and on hand when you file yo	our petition
		Cash	\$18.00

	ebtor 1 ebtor 2	Jerome Kenn Yolanda Dani	eth Cabell, Jr. elle Cabell		Case number (if known)	
17.	Examp —		vings, or other financial acc you have multiple account		leposit; shares in credit unions, brokerage house	es, and other similar
	□ No			Institution nam	ne:	
	– 165					
			17.1. checking acco	unt Huntington	Bank	\$15.00
18.			r publicly traded stocks nvestment accounts with br	okerage firms, money	market accounts	
			Institution or issuer	name:		
	joint v ■ No	venture	ck and interests in incorp rmation about them Name of entity:	·	oorated businesses, including an interest in a % of ownership: %	n LLC, partnership, and
	Negoti Non-ne ■ No	iable instruments i egotiable instrume	rate bonds and other negrate bonds and other negrate ned personal checks, cannot transfer are those you cannot transfer about them alsuer name:	shiers' checks, promis	ssory notes, and money orders.	
21.		ment or pension a ples: Interests in IF		403(b), thrift savings a	accounts, or other pension or profit-sharing plans	
	Yes.	List each account	separately. Type of account:	Institution nan	ne:	
			401k		account held in trust by the State	
				of Michigan	•	\$4,228.00
22.	Your s Examp ■ No	ty deposits and p share of all unused oles: Agreements v	deposits you have made se	, public utilities (electri	ue service or use from a company c, gas, water), telecommunications companies, o ne or individual:	or others
23.	Annuit ■ No	ies (A contract for	a periodic payment of mon	ey to you, either for life	e or for a number of years)	
	■ No □ Yes	lss:	uer name and description.			
24.	26 U.S.	ts in an education C. §§ 530(b)(1), 52	n IRA, in an account in a c 29A(b), and 529(b)(1).	qualified ABLE progr	am, or under a qualified state tuition progran	n.
	■ No □ Yes	Ins	titution name and descriptio	on. Separately file the	records of any interests.11 U.S.C. § 521(c):	

Debtor 1 Debtor 2	Jerome Kenneth Yolanda Danielle		Case number (if known)	
25. Trusts	, equitable or future i	nterests in property (other than anyth	ing listed in line 1), and rights or powers exerci	sable for your benefit
■ No				
☐ Yes.	Give specific informat	ion about them		
Exam		arks, trade secrets, and other intellec ames, websites, proceeds from royalties		
■ No				
⊔ Yes.	Give specific informat	ion about them		
		L		-
Exam ■ No	ples: Building permits, e	ther general intangibles exclusive licenses, cooperative associati ion about them	on holdings, liquor licenses, professional licenses	
Money or	property owed to you	1?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28 Taxre	funds owed to you			
■ No		on about them, including whether you al	ready filed the returns and the tax years	
■ No			port, maintenance, divorce settlement, property se	ttlement
Exam		sability insurance payments, disability be pans you made to someone else	enefits, sick pay, vacation pay, workers' compensa	tion, Social Security
	sts in insurance polici ples: Health, disability,		t (HSA); credit, homeowner's, or renter's insurance	
☐ Yes.		ompany of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:

Debto Debto		Jerome Kenn Yolanda Dani			Case number (if known	ı)
If S	you a				omeone who has died proceeds from a life insurance policy, or are currently entitled to re	ceive property because
	No	Give specific info	rmation			
ш	165.	Give specific into	imauon			l
E					u have filed a lawsuit or made a demand for payment rance claims, or rights to sue	
	Yes.	Describe each cla	aim			
34. O 1	ther c	contingent and u	nliquidated o	claims of eve	very nature, including counterclaims of the debtor and rights	to set off claims
	No					
	Yes.	Describe each cla	aim			
_	ny fin No	ancial assets yo	u did not alre	eady list		
		Give specific info	rmation			
	ior Pa	ırt 4. Write that n	umber here.		n Part 4, including any entries for pages you have attached	\$4,261.00
	-		gal or equitable	e interest in a	any business-related property?	
_		to Part 6.				
	es. C	o to line 30.				
						Current value of the portion you own? Do not deduct secured claims or exemptions.
38. A o	ccoui	nts receivable or	commission	s you alrea	dy earned	
		Describe				
		j.				
		equipment, furnis ples: Business-rela			modems, printers, copiers, fax machines, rugs, telephones, desk	s, chairs, electronic devices
Ц	Yes.	Describe				
40. M	achin	ery, fixtures, equ	uipment, sup	plies you us	se in business, and tools of your trade	
	No	Describe				
Ц	ı es.	Describe				

Debtor 1 Debtor 2		neth Cabell, Jr. ielle Cabell	Case number (if known)	
41. Inve	entory			
□ No □ Ye	s. Describe			
42. Inter	ests in partnership	s or joint ventures		
□ No □ Ye		ormation about them Name of entity:	% of ownership: %	
□ No.		lists, or other compilations sonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	□ No □ Yes. Describe.			
45. Add for Part 6:	s. Give specific information of the dollar value of Part 5. Write that not be compared by the	of all of your entries from Part 5, including any entries for page number here	In.	
ЦY	es. Go to line 47.			Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exai</i> □ No		oultry, farm-raised fish		
48. Crop	s—either growing	or harvested		
□ No □ Ye	s. Give specific infor	rmation		

 $49. \ \ \textbf{Farm and fishing equipment, implements, machinery, fixtures, and tools of trade}$

Official Form 106A/B Schedule A/B: Property

page 7

Debto Debto			neth Cabell, Jr. nielle Cabell		Case number (if known)	
	103					
50. Fa	rm ar	d fishing sup	olies, chemicals, and feed			
	No					
	Yes					
51. A n	ıy farı	n- and comme	ercial fishing-related property you did	not already list		
	No					
	Yes. C	Give specific inf	ormation			
52. A	Add th	e dollar value	of all of your entries from Part 6, inc	luding any entries for pag	es you have attached	
			number here			
Part 7:	:	Describe All Pr	operty You Own or Have an Interest in Tha	at You Did Not List Above		
53. D o	vou	have other pro	perty of any kind you did not already	/ list?		
			ets, country club membership	,		
	No					
□ <i>`</i>	Yes. C	Sive specific inf	ormation			
54. A	Add th	e dollar value	of all of your entries from Part 7. Wri	te that number here		\$0.00
Part 8:		ist the Totals o	f Each Part of this Form			
<i>EE</i> D	2014 4	Tetal real act	ate, line 2			* CO 000 00
		Total real est				\$60,000.00
			al and household items, line 15	\$17,000.00 \$6,800.00		
		•	al assets, line 36	\$4,261.00		
			ss-related property, line 45	\$4,281.00		
			nd fishing-related property, line 52	\$0.00		
			roperty not listed, line 54	+ \$0.00		
62. T	Total p	ersonal prope	erty. Add lines 56 through 61	\$28,061.00	Copy personal property total	\$28,061.00
62 T	Cotal a	of all property	on Schedule A/B. Add line 55 + line 62	,		#00.004.00
63. T	Jiai (n an property	On Schedule A/B. Add line 55 + line 62	-	_	\$88,061.00
					· · · · · · · · · · · · · · · · · · ·	

	I in this informa	tion to identify your of				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	First Name	Middle Name	Last Name		
1	ebtor 2 oouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States Bank	ruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
1	ase number					Check if this is an amended filing
0	fficial Forr	m 106C				
S	chedule	C: The Pro	perty You C	laim as Exempt		4/19
the nee	property you list	ed on <i>Schedule A/B: F</i> attach to this page as r	roperty (Official Form 106A	iling together, both are equally respon VB) as your source, list the property t litional Page as necessary. On the top	hat you claim as ex	empt. If more space is
spe any fun exe	ecific dollar amo applicable stated as—may be unle amption to a par	ount as exempt. Alter cutory limit. Some exe limited in dollar amou	natively, you may claim the mptions—such as those Int. However, if you claim	y the amount of the exemption you he full fair market value of the prop for health aids, rights to receive on an exemption of 100% of fair mark perty is determined to exceed that	erty being exempt ertain benefits, and set value under a la	ed up to the amount of d tax-exempt retirement aw that limits the
Pa	rt 1: Identify	the Property You Cla	im as Exempt			_
1.	Which set of e	xemptions are you cl	aiming? Check one only,	even if your spouse is filing with you.		
	☐ You are clair	ming state and federal	nonbankruptcy exemptions	s. 11 U.S.C. § 522(b)(3)		
	You are clair	ming federal exemption	ns. 11 U.S.C. § 522(b)(2)			
2.	For any prope	rty you list on <i>Sched</i>	ule A/B that you claim as	exempt, fill in the information below	w.	

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Debtor 1 Exemptions** 4065 Hereford St. Detroit, MI 48224 11 U.S.C. § 522(d)(1) \$20,640.00 \$60,000.00 **Wayne County** Line from Schedule A/B: 1.1 100% of fair market value, up to any applicable statutory limit 4065 Hereford St. Detroit, MI 48224 11 U.S.C. § 522(d)(1) \$20,640.45 \$60,000.00 **Wayne County** Line from Schedule A/B: 1.1 100% of fair market value, up to any applicable statutory limit usual household goods and 11 U.S.C. § 522(d)(3) \$4,000.00 \$2,000.00 furnishings, including but not limited to, small appliances, bedding, 100% of fair market value, up to kitchenware and supplies, cleaning any applicable statutory limit tools and supplies, assorted household tools, furnishings, ordinary furniture, lamps, and decorative items of negligble value

Official Form 106C

Line from Schedule A/B: 6.1

Line from Schedule A/B: 7.1

phones, computer, 2 televisions

Schedule C: The Property You Claim as Exempt

\$1.800.00

page 1 of 4

11 U.S.C. § 522(d)(3)

\$900.00

100% of fair market value, up to any applicable statutory limit

Jerome Kenneth Cabell, Jr. Debtor 1 Debtor 2 Yolanda Danielle Cabell Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B clothing and shoes 11 U.S.C. § 522(d)(3) \$1,000.00 \$300.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Cash 11 U.S.C. § 522(d)(5) \$18.00 \$6.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit checking account: Huntington Bank 11 U.S.C. § 522(d)(5) \$15.00 \$15.00 Line from Schedule A/B: 17.1 100% of fair market value, up to t.)

		any applicable statutory limit
	ou claiming a homestead exemption of more than \$170,350 ect to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment lo	
		'es. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No ☐ Yes

		ne Kenneth Cabell, Jr. da Danielle Cabell			Ca	se number (if known)	
Fil	l in this inforn	nation to identify your ca	se:				
De	btor 1						
De	ebtor 2	First Name Yolanda Danielle Ca	Middle Name	L	ast Name		
1 -	ouse if, filing)	First Name	Middle Name	L	ast Name		
Ur	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF M	ICHIC	BAN		
	nse number						☐ Check if this is an amended filing
		<u>rm 106C</u> e C: The Proj	perty You Cla	ıim	ı as Exei	mpt	4/19
For spe any fun exe to t	ded, fill out and e number (if kr each item of ecific dollar and applicable standard) applicable unption to a phe applicable rt 1: Identif Which set of	d attach to this page as manown). property you claim as ex nown as exempt. Alternal attutory limit. Some exempt articular dollar amount a statutory amount. The Property You Claim exemptions are you claim attuting state and federal not now the property of the property	empt, you must specify the tively, you may claim the for the prize of the property of the prop	e ame full fa r heal n exer ty is c	ount of the exemir market value of the aids, rights to opport to the competition of 100% of determined to execute the court spouse is filing our spouse is filing.	nption you claim. In the property be receive certain bot fair market valu	claim as exempt. If more space is additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the t, your exemption would be limited
	■ You are cla	aiming federal exemptions.	11 U.S.C. § 522(b)(2)				
2.	For any prop	erty you list on Schedule	e A/B that you claim as exe	• •			
		on of the property and line of that lists this property	n Current value of the portion you own	Am	ount of the exemp	tion you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for	each exemption.	
<u>De</u>	furnishings to, small ap kitchenwar tools and s household	ehold goods and s, including but not lim pliances, bedding, e and supplies, cleani upplies, assorted tools, furnishings,	\$4,000.00	• •	100% of fair ma	\$2,000.00 arket value, up to statutory limit	11 U.S.C. § 522(d)(3)
		rniture, lamps, and items of negligble valu	IE				

Official Form 106C

Line from Schedule A/B: 6.1

Line from Schedule A/B: 7.1

Line from Schedule A/B: 11.1

clothing and shoes

phones, computer, 2 televisions

Schedule C: The Property You Claim as Exempt

\$1,800.00

\$1,000.00

page 3 of 4

11 U.S.C. § 522(d)(3)

11 U.S.C. § 522(d)(3)

\$900.00

\$700.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

Jerome Kenneth Cabell, Jr. Debtor 1 Debtor 2 Yolanda Danielle Cabell Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash 11 U.S.C. § 522(d)(5) \$12.00 \$18.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit 401k: retirement account held in trust 11 U.S.C. § 522(d)(12) \$4,228.00 \$35,000.00 by the State of Michigan Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes

Best Case Bankruptcy

Fill in this inforr	nation to identify you	ır case:				
Debtor 1	Jerome Kennet	h Cabell, Jr.				
	First Name	Middle Name	Last Name			
Debtor 2	Yolanda Daniell				-	
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the	EASTERN DISTRICT OF MICH	IIGAN		-	
Case number _					□ Chock	if this is an
(ded filing
	4005		-			200 mmg
Official Forn		. Who Hous Claims (Soouro	d by Droport	.,	40/45
<u>Schedule</u>	D: Creditors	Who Have Claims S	secure	a by Propert	<u>y </u>	12/15
is needed, copy the	Additional Page, fill it	If two married people are filing togethe out, number the entries, and attach it to				
number (if known).						
′	have claims secured by	, , , ,				
	this box and submit t	his form to the court with your other s	schedules. Y	ou have nothing else t	to report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List A	II Secured Claims					
2. List all secured	claims. If a creditor has	more than one secured claim, list the cred	ditor separatel	Column A	Column B	Column C
for each claim. If m	ore than one creditor has	s a particular claim, list the other creditors cal order according to the creditor's name	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ally Finar	ncial	Describe the property that secures the	he claim:	\$20.069.00	\$17.000.00	\$3.069.00
Creditor's Name		2017 Chrysler Pacifica		<u> </u>		
		, , , , , , , , , , , , , , , , , , , ,				
		As of the date you file, the claim is: (Chook all that			
P.o. Box 3		apply.	SHECK all that			
	ton, MN 55438	Contingent				
Number, Street	, City, State & Zip Code	Unliquidated				
10/h a ayyaa 4h a da	h42 o	Disputed				
Who owes the de	ept? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as m car loan)	nortgage or se	cured		
Debtor 2 only		_				
Debtor 1 and De	•	☐ Statutory lien (such as tax lien, mec	hanic's lien)			
_	he debtors and another	Judgment lien from a lawsuit	lion on ma	stor vobiolo		
☐ Check if this cl community de		Other (including a right to offset)	nen on mo	otor vehicle		
	Opened					
	01/19 Last					

1513

Last 4 digits of account number

Active

Date debt was incurred 12/21/19

Debtor 1 Jerome Kenneth Cabell	, Jr.	Case number (if known)			
First Name Middle N	ame Last Name				
Debtor 2 Yolanda Danielle Cabell					
First Name Middle N	lame Last Name				
2.2 Loren Briggs	Describe the property that secures the claim:	\$18,719.55	\$60,000.00	\$0.00	
Creditor's Name	4065 Hereford St. Detroit, MI 48224	φ10,719.33	φου,υυυ.υυ	φυ.υυ	
	Wayne County				
1199 South Sheldon Rd.	Wayne ocumy				
Unit 65J	As of the date you file, the claim is: Check all that				
Plymouth, MI 48170	apply. □ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage or	secured			
Debtor 2 only	car loan)				
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	•	ntract Vendor			
community debt	Other (including a right to offset)				
Date debt was incurred 2015	Last 4 digits of account number				
Meridian Financial	Describe the property that secures the claim:	\$0.00	\$0.00	\$0.00	
Services, USA Creditor's Name	Describe the property that secures the claim.	1		Ψ0.00	
21 Overland Industrial					
Blvd., Bldg. 1					
PO Box 1410	As of the date you file, the claim is: Check all that	•			
Asheville, NC 28802-1410	apply. □ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
rumber, eneet, eney, endre a zip eede	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or	secured			
Debtor 2 only	car loan)	oodarda			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim relates to a	Other (including a right to offset)				
community debt	Uncluding a right to onset)				
·					
Date debt was incurred	Last 4 digits of account number				
Mantanta Vanation Villag					
Westgate Vacation Villas, LTD	Describe the property that secures the claim:	\$0.00	\$0.00	\$0.00	
Creditor's Name	bescribe the property that secures the dami.			• • • • • •	
5601 Windhover Drive	As of the date you file, the claim is: Check all that apply.				
Orlando, FL 32819-7905	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage or	secured			
☐ Debtor 2 only	car loan)				
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	☐ Other (including a right to offset)				
community debt	— Janor (moldaling a right to offset)				
Date debt was incurred	Last 4 digits of account number				
Date Jedt Mas IIICUITea	Last + vivits of account number				

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1	Jerome Kenneth Cabell, Jr.		Case number (if known)		
	First Name	Middle Name	Last Name		
Debtor 2	Yolanda Danielle	Cabell			
	First Name	Middle Name	Last Name		
Add the	dollar value of your ent	ries in Column A on this page	. Write that number here:	\$38,788.5	5

\$38,788.55

Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in this	s information to identify your case	3 -				1	
Debtor 1	Jerome Kenneth Cab	Middle Name	Last Nam	e			
Debtor 2	Yolanda Danielle Cal	pell					
(Spouse if, filir	ring) First Name	Middle Name	Last Nam	е			
United Sta	ates Bankruptcy Court for the: EA	ASTERN DISTRICT C	F MICHIGAN				
Case num	ber						
(if known)						_	ck if this is an nded filing
Official	Form 106E/F						
Schedu	ule E/F: Creditors Who	Have Unsecu	ired Claim	S			12/15
Schedule G: Schedule D: left. Attach t name and ca	ory contracts or unexpired leases that : Executory Contracts and Unexpired : Creditors Who Have Claims Secured the Continuation Page to this page. If ase number (if known). List All of Your PRIORITY Unsec	Leases (Official Form 1 by Property. If more sp you have no informatio	06G). Do not incl ace is needed, co	ude any cre opy the Par	editors with partially at you need, fill it out,	secured claims that number the entries	t are listed in s in the boxes on the
	r creditors have priority unsecured cla						
_ `	Go to Part 2.	o ugumot you .					
■ Yes							
identify possible Part 1. I	of your priority unsecured claims. If a what type of claim it is. If a claim has bo e, list the claims in alphabetical order act if more than one creditor holds a particular explanation of each type of claim, see the	th priority and nonpriority cording to the creditor's n ar claim, list the other cre	amounts, list that name. If you have reditors in Part 3.	claim here a nore than tw	and show both priority	and nonpriority amou	unts. As much as
(r or an	explanation of each type of claim, see the			i bookiet.)	Total claim	Priority amount	Nonpriority amount
	ichigan Department of Treasu	Last 4 digits of	account number	3951	\$809.00	\$809.0	0 \$0.00
Co P.	iority Creditor's Name ollection/Bankruptcy Unit .O. Box 30168 ansing, MI 48909	When was the	debt incurred?	2020		_	
	umber Street City State Zip Code	As of the date	you file, the claim	is: Check a	all that apply		
Who i	incurred the debt? Check one.	☐ Contingent					
	ebtor 1 only	☐ Unliquidated	I				
☐ De	ebtor 2 only	☐ Disputed					
■ De	ebtor 1 and Debtor 2 only	Type of PRIOR	ITY unsecured cl	aim:			
☐ At	least one of the debtors and another	☐ Domestic su	pport obligations				
□сн	neck if this claim is for a community o	lebt Taxes and o	ertain other debts	you owe the	government		
	claim subject to offset?		eath or personal in	jury while yo	ou were intoxicated		
■ No		Other. Spec	ify				
☐ Ye	es	·	account s	tated			_
Part 2:	List All of Your NONPRIORITY U	nsecured Claims					
	r creditors have nonpriority unsecured						
	You have nothing to report in this part. S		urt with your other	schedules			
■ Yes.			, , ,				
unsecui	of your nonpriority unsecured claims red claim, list the creditor separately for he creditor holds a particular claim, list the	each claim. For each clai	m listed, identify w	hat type of o	claim it is. Do not list cl	aims already include	ed in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debto Debto	r 1 Jerome Kenneth Cabell, Jr. r 2 Yolanda Danielle Cabell	Case number (if known)	
4.1	Ability Recovery Servi	Last 4 digits of account number 83N1	\$3,662.00
	Nonpriority Creditor's Name Pob 4031 Wyoming, PA 18644	When was the debt incurred? Opened 10/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that yeerport as priority claims	ou did not
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney Walden Univers	ity
4.2	Ally Nonpriority Creditor's Name	Last 4 digits of account number	\$140.00
	PO Box 380902 Minneapolis, MN 55438-0902	When was the debt incurred? 2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that ye report as priority claims	ou did not
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify account stated	
4.3	American First Finance	Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name c/o Becket and Lee LLP PO Box 3002	When was the debt incurred?	
	Malvern, PA 19355-0701 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that ye report as priority claims	ou did not
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify account stated	

Debto	Yolanda Danielle Cabell		Case number (if known)	
4.4	AT&T	Last 4 digits of account number	7100	\$335.00
	Nonpriority Creditor's Name PO BOX 5093	When was the debt incurred?	2019	
	Carol Stream, IL 60197-5093			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify account st	ated	
4.5	Beaumont Health System	Last 4 digits of account number	2003	\$130.00
	Nonpriority Creditor's Name	_		•
	Business Center	When was the debt incurred?	2019	
	750 Stephenson Highway PO BOX 5042			
	Troy, MI 48007-5042			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify medical se	rvices	
	Beaumont Home Medical			
4.6	Equipment	Last 4 digits of account number	9623	\$86.00
	Nonpriority Creditor's Name 1200 Stephenson Hwy.	When was the debt incurred?	2019	
	Troy, MI 48083 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	_	Student loans		
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	

■ No ☐ Yes

■ Other. Specify account stated

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

	Yolanda Danielle Cabell		Case number (if known)	
4.7	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	6007	\$2,475.00
	Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 10/17 Last Active 11/14/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.8	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	9122	\$847.00
	Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/18 Last Active 11/14/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.9	Cb Indigo/gf Nonpriority Creditor's Name	Last 4 digits of account number	3146	\$435.00
	Po Box 4499 Beaverton, OR 97076	When was the debt incurred?	Opened 12/18 Last Active 11/15/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	■ Other. Specify Credit Card		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Yolanda Danielle Cabell		Case number (if known)	
Cbm Services Inc	Last 4 digits of account number	8329	\$351.00
Nonpriority Creditor's Name 300 Rodd St. Midland, MI 48640	When was the debt incurred?	Opened 06/17	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Elliot Moss M.D.	
Comenitybank/victoria	Last 4 digits of account number	9376	\$108.00
Nonpriority Creditor's Name	_	One and 02/40 Least Astive	
Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 03/19 Last Active 12/15/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	· ,	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Convergent Outsourcing	Last 4 digits of account number	9776	\$446.00
Nonpriority Creditor's Name	_		
Po Box 9004	When was the debt incurred?	Opened 02/17	
Renton, WA 98057 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	, ,	,	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?		ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
-	· · · · · · · · · · · · · · · · · · ·	Ŧ ·	

2 Yolanda Danielle Cabell		Case number (if known)	
Credence Resource Mana	Last 4 digits of account number	5862	\$952.00
Nonpriority Creditor's Name Po Box 2300	When was the debt incurred?	Opened 01/17	
Southgate, MI 48195 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and the second section is a second section.	
■ No	☐ Debts to pension or profit-sharin	• • • • • • • • • • • • • • • • • • • •	
Yes	Other. Specify Collection	Attorney Att Mobility	
Credit Acceptance Corp	Last 4 digits of account number	7476	\$5,777.00
Nonpriority Creditor's Name Po Box 5070 Southfield, MI 48086	When was the debt incurred?	Opened 10/16 Last Active 6/13/19	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	, i.e. ee auto , eue,e e	STOOK all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Automobile	9	
Credit One Bank Na	Last 4 digits of account number	7582	\$496.00
Nonpriority Creditor's Name	_	One and 42/40 Least Active	
Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 12/18 Last Active 10/31/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card		

	or 2 Yolanda Danielle Cabell	Case number (if known)	
4.1 6	Davenport University	Last 4 digits of account number	\$2,936.00
	Nonpriority Creditor's Name 19499 Victor Parkway Livonia, MI 48152	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify account stated	
4.1	DTE Energy	Last 4 digits of account number 2642	\$245.00
<u>'</u>	Nonpriority Creditor's Name		<u> </u>
	Attn: Bankruptcy Department One Energy Plaza	When was the debt incurred? 2019	
	735 W.C.B. Detroit. MI 48226		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility bill	
4.1 8	DTE Energy	Last 4 digits of account number	\$185.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department	When was the debt incurred?	
	One Energy Plaza 735 W.C.B. Detroit, MI 48226		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utility bill	

2 Yolanda Danielle Cabell		Case number (if known)	
Enhanced Recovery Co L	Last 4 digits of account number	4971	\$767.00
Nonpriority Creditor's Name Po Box 57547	When was the debt incurred?	Opened 05/17	
Jacksonville, FL 32241 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Tmobile	
Fed Loan Serv	Last 4 digits of account number	0009	\$292,184.0
Nonpriority Creditor's Name Pob 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 03/19 Last Active 12/31/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	☐ Other. Specify		
	Educationa	I	
First Access Nonpriority Creditor's Name	Last 4 digits of account number	6208	\$433.0
PO Box 89028 Sioux Falls, SD 57109	When was the debt incurred?	2019	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
■ No	·		
Yes	Other. Specify account sta	ated	

First Access	Last 4 digits of account number		\$421.00
Nonpriority Creditor's Name PO Box 89028	When was the debt incurred?	2019	
Sioux Falls, SD 57109 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify account sta	ated	
First Premier Bank	Last 4 digits of account number	9326	\$554.00
Nonpriority Creditor's Name		Opened 08/19 Last Active	
3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	10/04/19	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt	_		
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	<u> </u>	
Ford Motor Credit Comp	Last 4 digits of account number	0296	\$10,326.00
Nonpriority Creditor's Name			,
Pob 542000 Omaha, NE 68154	When was the debt incurred?	Opened 02/14 Last Active 11/22/19	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
\square Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Lease		

Genesis FS Card Services	Last 4 digits of account number	3146	\$436.0
Nonpriority Creditor's Name PO BOX 4477	When was the debt incurred?	2019	
Beaverton, OR 97076-4477 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арргу	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify account sta	ated	
Henry Ford Pathology	Last 4 digits of account number		\$339.0
Nonpriority Creditor's Name			******
PO BOX 673835 Detroit, MI 48267-3835	When was the debt incurred?	11/22/2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify medical		
Henry Ford Health System	Last 4 digits of account number	2314	\$133.0
Nonpriority Creditor's Name			V 10010
PO BOX 553920	When was the debt incurred?	2019	
Detroit, MI 48255 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, ,	or onook an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	□ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify medical se		

	Yolanda Danielle Cabell	Case number (if known)		
' 1	JP Morgan Chase Bank, N.A. Nonpriority Creditor's Name Attn: Bankruptcy PO Box 182051 Columbus, OH 43224-0785	Last 4 digits of account number	\$992.00	
A P		When was the debt incurred? 2019		
	umber Street City State Zip Code /ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community ebt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
Is	the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify account stated		
- 1	VNV Funding LLC onpriority Creditor's Name	Last 4 digits of account number	\$412.00	
P	O Box 10497 Greenville, SC 29603	When was the debt incurred?		
N	umber Street City State Zip Code //no incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	□ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	☐ Student loans		
-	ebt the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify account stated		
	IEEMIC Insurance Company	Last 4 digits of account number	\$153.00	
1	onpriority Creditor's Name 685 N. Opdyke Road Juburn Hills, MI 48326	When was the debt incurred?		
N	umber Street City State Zip Code /ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
_	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
_	Check if this claim is for a community	☐ Student loans		
d	ebt the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts		
_	Yes	■ Other. Specify account stated		

	Yolanda Danielle Cabell	Case number (if known)			
4.3	Meridian Financial Svc	Last 4 digits of account number	8189	\$1,433.00	
	Nonpriority Creditor's Name 1636 Hendersonville Rd Ste 135 Asheville, NC 28803	When was the debt incurred?	Opened 04/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	s: Check all that apply			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated			
		☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	☐ Check if this claim is for a community				
	debt Is the claim subject to offset?		☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Collection	■ Other. Specify Inc		
4.3	Meridian Financial Svc	Last 4 digits of account number	7894	\$479.00	
	Nonpriority Creditor's Name 1636 Hendersonville Rd Ste 135 Asheville, NC 28803	When was the debt incurred?	Opened 04/19		
	Number Street City State Zip Code	As of the date you file, the claim			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated ☐ Disputed			
	■ Debtor 1 and Debtor 2 only				
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims			
	■ No	<u> </u>			
	□ Yes	□ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Outdoor Adventures Inc			
4.3	Michigan Center for Fertility	Last 4 digits of account number	3100	\$24.00	
	Nonpriority Creditor's Name 4700 Thirteen Mile Road Warren, MI 48092-4438	When was the debt incurred?	2019		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing			
	☐ Yes	■ Other. Specify medical services			

Michigan First Cu	Last 4 digits of account number	2105	\$983.00			
Nonpriority Creditor's Name	_	Opened 01/19 Last Active				
27000 Evergreen Rd Southfield, MI 48076	When was the debt incurred?					
Number Street City State Zip Code	As of the date you file, the claim i					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
Yes	Other. Specify Credit Card	<u> </u>				
Michigan First Cu	Last 4 digits of account number	0060	\$500.00			
Nonpriority Creditor's Name			•			
27000 Evergreen Rd Southfield, MI 48076	When was the debt incurred?	Opened 03/13 Last Active 12/27/19				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
☐ Debtor 1 only						
■ Debtor 2 only	☐ Contingent☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
Yes	Other. Specify Check Cred	lit Or Line Of Credit				
Portfolio Recov Assoc	Last 4 digits of account number	9369	\$1,931.00			
Nonpriority Creditor's Name 120 Corporate Blvd Ste 100	When was the debt incurred?	Opened 08/17				
Norfolk, VA 23502 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured					
Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
		Company Account Capital One				
□Yes	Other. Specify Bank Usa N					

Rent-A-Canter	Last 4 digits of account number	\$900.0
Nonpriority Creditor's Name 13314 E. Jefferson Detroit, MI 48215-2719	When was the debt incurred? 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loans	
ls the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify account stated	
Rochester Anesthesia Services	Last 4 digits of account number 3059	\$300.
Nonpriority Creditor's Name PO Box 6932	When was the debt incurred? 2019	·
Carol Stream, IL 60197-6932 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No Yes	Other. Specify medical services	
Ronald D. Kerwin MD PC	Last 4 digits of account number	\$20.
Nonpriority Creditor's Name 6330 Orchard Lake Rd. Suite 120 West Bloomfield, MI 48322	When was the debt incurred? 05/17/2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify medical	

1	onald Kerwin MD	Last 4 digits of account number		\$20.00
63	onpriority Creditor's Name 330 Orchard Lake Road Suite 120 Vest Bloomfield, MI 48322	When was the debt incurred?	2019	
Νι	umber Street City State Zip Code ho incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	a Claim.	
de	I Check if this claim is for a community the claim subject to offset?	_	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	l Yes	Other. Specify medical		
s	E Mich St Emp Fedl C	Last 4 digits of account number	0002	\$4,319.00
No	onpriority Creditor's Name			
	7135 W 10 Mile Rd outhfield, MI 48075	When was the debt incurred?	Opened 05/18 Last Active 1/09/20	
	umber Street City State Zip Code ho incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$oldsymbol{l}$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
de	Check if this claim is for a community		ration agreement or divorce that you did not	
	the claim subject to offset?	report as priority claims	and an and ather similar debte	
	l _{No} l Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Home Impr		
	ierra Lending, LLC d/b/a Tall			
G	rass Fin onpriority Creditor's Name	Last 4 digits of account number		\$198.0
	.O. Box 647	When was the debt incurred?		
	anta Ysabel, CA 92070 umber Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	ho incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community	☐ Student loans		
	ebt the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	l _{No}	Debts to pension or profit-sharin	g plans, and other similar debts	
	l Yes	Other. Specify account sta	ated	

Syncb/jcp	Last 4 digits of account number	0626	\$453.00					
Nonpriority Creditor's Name		Opened 03/19 Last Active						
Po Box 965007 Orlando, FL 32896	When was the debt incurred?							
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim i	s: Check all that apply						
_								
☐ Debtor 1 only	☐ Contingent							
■ Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
•	☐ Student loans							
	report as priority claims	ration agreement or divorce that you did not						
No	Debts to pension or profit-sharin	g plans, and other similar debts						
Yes	Other. Specify Charge Acc	count						
Tbom/milestone	Last 4 digits of account number	5816	\$447.0					
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ111.0					
Po Box 4499 Beaverton, OR 97076	When was the debt incurred?	Opened 12/18 Last Active 11/15/19						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i							
Debtor 1 only	☐ Contingent							
■ Debtor 2 only	☐ Unliquidated							
_	☐ Disputed							
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Student loans							
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa							
Is the claim subject to offset?	report as priority claims	agreement of arrefeed that you are not						
■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
Yes	Other. Specify Credit Card	<u> </u>						
Tbom/total Crd	Last 4 digits of account number	6208	\$370.0					
Nonpriority Creditor's Name	_							
Po Box 85710 Sioux Falls, SD 57118	When was the debt incurred?	Opened 04/19 Last Active 10/04/19						
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply						
Who incurred the debt? Check one.								
Debtor 1 only	☐ Contingent							
■ Debtor 2 only	☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
☐ Check if this claim is for a community	☐ Student loans							
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
■ No	□ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card							
Yes								

	Yolanda Danielle Cabell		Case number (if known)	
4.4 6	Universal Credit Servi	Last 4 digits of account number	3293	\$95.00
	Nonpriority Creditor's Name 3582 Avon St	When was the debt incurred?	Opened 10/18	
	Hartland, MI 48353 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	o plans, and other similar debts	
	■ No	·	Attorney Michigan Center For	
	Yes	Other. Specify Fertility	Attorney withingan center For	
4.4 7	Visa	Last 4 digits of account number	6208	\$375.00
	Nonpriority Creditor's Name PO Box 89028	When was the debt incurred?	2019	
	Sioux Falls, SD 57109-9028 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify account sta	ated	
4.4	Walden University	Last 4 digits of account number		\$3,663.00
	Nonpriority Creditor's Name 1001 Fleet Street Paltimore MD 21202	When was the debt incurred?		
	Baltimore, MD 21202 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	,	- Constitution of the cons	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify account sta	ateu	

	Yolanda Danielle Cabell		Case number (if known)					
4.4 9	Webbank/fingerhut Nonpriority Creditor's Name	Last 4 digits of account number	1924	\$575.00				
	6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred?	Opened 02/19 Last Active 1/06/20	-				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent						
	■ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other. Specify Charge Ac	count	-				
4.5	Western Union	Last 4 digits of account number	1354	\$163.00				
	Nonpriority Creditor's Name PO Box 6036 Englewood, CO 80112	When was the debt incurred?	2019	-				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	d claim:					
	☐ Check if this claim is for a community debt	_	and a second and the					
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	aration agreement or divorce that you did not					
	□ Yes							
	☐ Yes	Other. Specify account st	aleu	-				
is tryi have	List Others to Be Notified About a Denis page only if you have others to be notified ing to collect from you for a debt you owe to smore than one creditor for any of the debts the for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that your bankruptcy, for a debt that yomeone else, list the original creditor in at you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agency	y here. Similarly, if you				
	and Address	On which entry in Part 1 or Part 2 did you	_					
-	y Recovery Services, LLC ox 4262		Part 1: Creditors with Priority Unsecured Clai					
_	iton, PA 18505	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims				
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
Credi	t Control	· · · · · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecured Clai	ims				
5757 Phantom Drive		•	Part 2: Creditors with Nonpriority Unsecured	Claims				
Suite Hazel	330 wood, MO 63042-2429							
· · · · · · · · · · · · · · · · · · ·		Last 4 digits of account number						
	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	C. Brunell		Part 1: Creditors with Priority Unsecured Clai					
	Six Mile Road ia, MI 48152		Part 2: Creditors with Nonpriority Unsecured	Claims				
		Last 4 digits of account number						
	nd Address nants & Medical Credit Corp.	On which entry in Part 1 or Part 2 did you Line 4.27 of (Check one):	list the original creditor?					

Schedule E/F: Creditors Who Have Unsecured Claims

Official Form 106 E/F

Debtor 1 Jerome Kenneth Cabell, Jr. Debtor 2 Yolanda Danielle Cabell		Case number (if known)
6324 Taylor Dr.		☐ Part 1: Creditors with Priority Unsecured Claims
Flint, MI 48507-4685		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Szuba & Associates, PLLC	Line 4.24 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
40600 Ann Arbor Road, Ste 100 Plymouth, MI 48170		■ Part 2: Creditors with Nonpriority Unsecured Claims
riyinoddi, wii 40170	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Transworld Systems Inc.	Line 4.30 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
500 Virginia Dr. Suite 514 Fort Washington, PA 19034		■ Part 2: Creditors with Nonpriority Unsecured Claims
Tort Washington, 1 A 13034	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
United Collection Bureau Inc.	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
for YOUR CREDITORS 5620 Southwyck Blvd., Suite 206 Toledo, OH 43614		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Weber & Olcese, PLC	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
3250 W. Big Beaver Road Ste. 124 Troy, MI 48084		Part 2: Creditors with Nonpriority Unsecured Claims
110y, WII 40004	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 809.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 809.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 292,184.00
claims from Part 2	C~	Obligations evision out of a consention agreement or diverse that		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 52,220.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 344,404.00

Fill in this inform	Fill in this information to identify your case:							
Debtor 1								
	First Name	Middle Name	Last Name					
Debtor 2	Yolanda Danielle	Cabell						
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		EASTERN DISTRICT C	PF MICHIGAN					
Case number					☐ Check if this is an amended filing			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

L1 Loren Briggs 1199 South Sheldon Rd. Unit 65J Plymouth, MI 48170 Land Contract for purchase of residence

Best Case Bankruptcy

Fill in this infor	mation to identify your	case:			
Debtor 1	Jerome Kenneth				
Debtor 2	First Name Yolanda Danielle	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF M	IICHIGAN		
Case number					
(if known)					☐ Check if this is an amended filing
Official Fo	orm 106H				
Schedule	H: Your Cod	ebtors			12/15
our name and o	case number (if known)	boxes on the left. Attach the Answer every question. you are filing a joint case, do re	_		ny Additional Pages, write
☐ Yes					
■ No. Go to	line 3. your spouse, former spo	, Nevada, New Mexico, Puerto			
☐ Ye	S.				
	In which community stat	e or territory did you live?		Fill in the name and cu	rrent address of that person.
-	City	State	Zip Code		
in line 2 aga Form 106D) out Column	ain as a codebtor only i , Schedule E/F (Officia	f that person is a guarantor Form 106E/F), or Schedule	or cosigner. Make	Column 2: The creditor Check all schedule D, line Schedule D, line Schedule E/F, line	
	-			☐ Schedule G, line	
Number City	Street	State	ZIP Code		
Number	Street	0	7000	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐	
City		State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1 Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com 20-42687-tjt Doc 1 Filed 02/26/20 Entered 02/26/20 14:33:45 Page 45 of 71

Fill	in this information to identify your o	ase:								
Del	btor 1 Jerome Ker	nneth Cabell, Jr.				_				
	btor 2 Yolanda Da	nielle Cabell				_				
Uni	ited States Bankruptcy Court for the	e: EASTERN DISTRICT	OF MICHIG	AN		_				
	se number 							led filing nent sho	wing postpetition e following date:	
O	fficial Form 106I						MM / DD/		o rene innig date.	
_	chedule I: Your Inc	ome					IVIIVI / DD/			12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filir ur spouse is not filing wi On the top of any addition	ng jointly, ar th you, do n	nd your spo not include	use i inforr	s livi natio	ing with you, inc on about your sp	lude inf ouse. If	ormation about more space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or no	n-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employ	/ed			■ Emp	loyed		
	information about additional		☐ Not employed			☐ Not	☐ Not employed			
	employers.	Occupation	lending	support			analys	t		
	Include part-time, seasonal, or self-employed work.	Employer's name	United S	hore Mort	gage)	State of	of Mich	igan	
	Occupation may include student or homemaker, if it applies.	Employer's address					Action	Proce	partment of St ssing Unit - B 8918-0001	
		How long employed th	nere?	1 week				10 yea	rs	
Par	Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If y	ou have not	hing to repo	ort for	any I	ine, write \$0 in th	e space.	Include your no	n-filing
	ou or your non-filing spouse have me space, attach a separate sheet to		mbine the in	formation fo	or all e	mplo	yers for that pers	on on th	e lines below. If	you need
							For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	2,080.00	\$	4,673.57	
3.	Estimate and list monthly over	time pay.			3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.			4.	\$	2,080.00	\$	4,673.57	

Debtor 1 Jerome Kenneth Cabell, Jr.
Poebtor 2 Yolanda Danielle Cabell

Case number (if known)

				For	Debtor 1		r Debtor n-filing s		
	Сору	y line 4 here	4.	\$	2,080.00	\$,673.5	
_				_	<u> </u>	_			
5.	List a	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	435.50	\$_		367.23	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$_		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$_		0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$_		153.99	
	5e.	Insurance	5e.	\$_	0.00	\$_		576.98	
	5f.	Domestic support obligations Union dues	5f.	\$_	0.00	\$_		0.00	
	5g. 5h.	Other deductions. Specify:	5g. 5h	*_ +	0.00	- \$ - \$		0.00	
_			_	· —	0.00	· –		0.0	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	435.50	\$_		,098.20	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,644.50	\$_	3	,575.3	7_
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		0.00	n
	8b.	Interest and dividends	8b.	\$_	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		Ψ_ \$		\$_ \$			_
	8d.		8c. 8d.	\$_	0.00	\$_		0.00	
	ou. 8e.	Unemployment compensation Social Security	8e.	\$ 	0.00	\$ \$		0.0	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f.	\$_	0.00	\$_ \$_		0.00	
	8g. 8h.	Other monthly income. Specify:	8g. 8h	- ^φ	0.00				_
	OII.	Other monthly income. Specify.	– OII. -	† Þ_	0.00	- Ф_		0.00	<u>u</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_		0.0	00
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$	5	1,644.50 + \$	3,	575.37	= \$	5,219.87
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.							
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your of friends or relatives. of tinclude any amounts already included in lines 2-10 or amounts that are not a sify:	deper				Schedule	e <i>J.</i> +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					e. 12.	\$	5,219.87
12	De v	ou expect an increase or decrease within the year often you file this forms	,					Comb	ined nly income
13.	■	ou expect an increase or decrease within the year after you file this form? No.	f 						
		Yes. Explain:							

Fill	in this information to identify your case:				
Deb	tor 1 Jerome Kenneth Cabell, Jr.		Check	if this is:	
	o. o		□ A	an amended filing	
	tor 2 Yolanda Danielle Cabell				ving postpetition chapter the following date:
(Spo	buse, if filing)		· ·	s expenses as on	the following date.
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGA	AN	N	MM / DD / YYYY	
	e number nown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
info					
1.	Is this a joint case?				
	No. Go to line 2.				
	■ Yes. Does Debtor 2 live in a separate household?				
	■ No □ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Housel	hold of Debto	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	555.67.2.		_	250	□ No
	Do not state the dependents names.	Daughter		1	■ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
٥.	expenses of people other than yourself and your dependents?				
exp	<u> </u>				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Yoficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4. \$		610.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		120.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		125.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		90.00
_	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses 20-42687-tjt Doc 1 Filed 02/26/20 Entered 02/26/20 14:33:45 Page 48 of 71

Official Form 106J Schedule J: Your Expenses 20-42687-tjt Doc 1 Filed 02/26/20 Entered 02/26/20 14:33:45 Page 49 of 71

						1
Fill in this inforr	mation to identify your	case:				
Debtor 1	Jerome Kenneth	Cabell, Jr.				
	First Name	Middle Name	Las	st Name		
Debtor 2	Yolanda Danielle	Cabell				
(Spouse if, filing)	First Name	Middle Name	Las	st Name		
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT	OF MICHIGA	N.		
Case number						
(if known)						☐ Check if this is an amended filing
Official Form Declarat		an Individua	l Debt	or's	Schedules	12/15
obtaining money		n connection with a ban				tement, concealing property, or 100, or imprisonment for up to 20
Sigr	n Below					
Did you pay	y or agree to pay some	one who is NOT an atto	rney to help	you fil	I out bankruptcy forms?	
■ No						
☐ Yes. N	lame of person					nkruptcy Petition Preparer's Notice,
					Deciaratio	n, and Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sun	nmary and s	chedul	es filed with this declarat	ion and
X /e/ lord	ome Kenneth Cabell,	Ir	Y	lel Va	olanda Danielle Cabell	
	e Kenneth Cabell, Jr		^		nda Danielle Cabell	
	re of Debtor 1	•			ture of Debtor 2	
9				0		
Date F	February 26, 2020			Date	February 26, 2020	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fil	Lin this inform	nation to identify you	r case:			
De	btor 1	Jerome Kenneth	Middle Name	Last Name		
De	btor 2	Yolanda Danielle	e Cabell			
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
	se number _				_	heck if this is an mended filing
St Be info	as complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for supp v additional pages, write you	
Pa	rt 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	■ Married □ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
D -		·	nedule H: Your Codebtors (Of	ificial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		dar years?
	□ No ■ Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$4,314.04
			☐ Operating a business		☐ Operating a business	

Official Form 107

		Debtor 1				Debtor 2				
			Sources of inco		Gross income (before deductions an exclusions)	ıd	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	r last calei nuary 1 to	ndar year: December :	31, 2019)	■ Wages, common bonuses, tips	Wages, commissions, sources, tips		■ Wages, combonuses, tips	missions,	\$56,297.00	
				☐ Operating a b	usiness			☐ Operating a	business	
		dar year bei December :		■ Wages, commonutes, tips	nissions,	\$23,913.0	00	■ Wages, combonuses, tips	missions,	\$40,750.00
				Operating a b	usiness			☐ Operating a	business	
5.	Include in and other winnings. List each	come regard public benef If you are fili	less of wheth it payments; ng a joint cas he gross inco	er that income is t bensions; rental in e and you have in	axable. Exam come; interes come that you	revious calendar yea ples of other income a tt; dividends; money co u received together, list y. Do not include incom	re alii ollecte t it on	ed from lawsuits; ly once under De	royalties; and ebtor 1.	
				Debtor 1				Debtor 2		
				Sources of inco Describe below.	me	Gross income from each source (before deductions an exclusions)	ıd	Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	rt 3: Lis	t Certain Pa	yments You	Made Before You	ı Filed for Ba	ınkruptcy				
6.	□ No.	Neither De individual puring the No. Yes	ebtor 1 nor D orimarily for a 90 days befo Go to line 7 List below e paid that cre not include to adjustment or Debtor 2 o 90 days befo Go to line 7 List below e include pay	personal, family, or re you filed for bar ach creditor to whe ditor. Do not inclu- payments to an at on 4/01/22 and ever r both have primare re you filed for bar ach creditor to wh	arily consum or household parkruptcy, did y om you paid a de payments torney for this very 3 years a arily consum akruptcy, did y om you paid a	purpose." you pay any creditor a set total of \$6,825* or more for domestic support of bankruptcy case. after that for cases filed the debts. you pay any creditor a set total of \$600 or more	total of total of total of and t	of \$6,825* or more pay tions, such as cher after the date of \$600 or more?	re? ments and the ild support and fadjustment.	ne total amount you nd alimony. Also, do
	Creditor	's Name and	l Address	Dates	s of payment	Total amount	t	Amount you	Was this n	ayment for
					, , , ,	paid		still owe		,

	otor 2 Yolanda Danielle Cabell		Cas	se number (if known)		
	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner r more of their voting	erships of which you g securities; and ar	u are a general p ny managing agei	artner; corporations nt, including one for
	■ No □ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	s payment
	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cost			any property on a	count of a debt	that benefited an
	■ No					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for thi	
Por	t 4: Identify Legal Actions, Repossession	and Forcelegures	paid	still owe	Include creditor	r's name
	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of the o	case
	Case number					
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	hed, attached, s	seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan a No Yes. Fill in the details.		uding a bank or fir	nancial institution	, set off any amo	ounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an		rty in the possess			of creditors, a
	■ No □ Yes					
Por						
				-f	0	
13.	Within 2 years before you filed for bankrup	tcy, did you give any gifts	s with a total value	of more than \$60	per person?	
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts			s you gave	Value
	Person to Whom You Gave the Gift and Address:			the gi	113	

Official Form 107

	otor 1 Jerome Kenneth Cabell, Jr. Yolanda Danielle Cabell			Case number (if known)	
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con			ns with a total	l value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did y	you lose anytl	hing because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.					
	how the loss occurred	nclude	be any insurance coverage for the letthe amount that insurance has paid. Let ce claims on line 33 of Schedule A/B:	_ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers		00 000000000000000000000000000000000000			
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or princlude any attorneys, bankruptcy petition pre No Yes. Fill in the details.	reparir	g a bankruptcy petition?			rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Law Offices of Marshall D. Schultz 29777 Telegraph Road, Suite 2203 Southfield, MI 48034 marshalld.schultz@gmail.com		Attorney Fees		02/10/2020 for payment on dismissed case 20-41890.	\$200.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	tors o	to make payments to your creditor		r transfer any prope	rty to anyone who
	■ No□ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers report to the younger of the younger o	busin made a	ess or financial affairs? as security (such as the granting of a s			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					

Official Form 107

Case number (if known)

 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you beneficiary? (These are often called asset-protection devices.) No 									
	Yes. Fill in the details.								
	Name of trust	Description and v	alue of the prop	perty transf	erred	Date Transfer was made			
Par	8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Sto	orage Units	3				
20.	Within 1 year before you filed for bankruptcy.	were any financial ac	counts or instri	uments hel	d in your name, or for y	our benefit, closed.			
20.	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No	other financial accour	nts; certificates	of deposit		, ,			
	Yes. Fill in the details.								
		Last 4 digits of account number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 yecash, or other valuables?	ear before you filed for	bankruptcy, ar	ny safe dep	osit box or other depos	itory for securities,			
	No								
	Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		he contents	Do you still have it?				
22.	Have you stored property in a storage unit or	place other than your	home within 1	vear before	vou filed for bankrupt	cv?			
	you olorou proporty a closuge a o.	place cilici iliali yeal		,	, ,	- , .			
	No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe t	he contents	Do you still have it?			
Par	9: Identify Property You Hold or Control for	or Someone Else							
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ide any propert	ty you borre	owed from, are storing	for, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property	Value			
Par	10: Give Details About Environmental Infor	rmation							
For	he purpose of Part 10, the following definition	ns apply:							
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surface	water, ground	0.	•				
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	•	environmental l	aw, whethe	r you now own, operate	e, or utilize it or used			
	Hazardous material means anything an envir hazardous material, pollutant, contaminant, c	onmental law defines a	as a hazardous	waste, haz	ardous substance, toxi	c substance,			
Rep	ort all notices, releases, and proceedings that	you know about, rega	rdless of when	they occur	red.				

Official Form 107

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?										
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Hav	e you notified any governmental unit of	any release of hazardous material?							
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any envi	ronmental law? Include settlements	and orders.					
		No Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pai	t 11:	Give Details About Your Business or	Connections to Any Business							
27.	Witl	hin 4 years before you filed for bankrupt	cy, did you own a business or have an	y of the following connections to an	y business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
		No. None of the above applies. Go to Part 12.								
		Yes. Check all that apply above and fill	in the details below for each business	i.						
	Ad	siness Name dress	Describe the nature of the business	Employer Identification numbe Do not include Social Security						
	(Nui	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed						
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	o anyone about your business? Incl	ude all financial					
		No Yes. Fill in the details below.								
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued							

Debtor 1 Debtor 2	Jerome Kenneth Cabell, Jr. Yolanda Danielle Cabell	•		Case number (if known)
Part 12:	Sign Below			
are true a with a ba		tatement	, concealing proper	, and I declare under penalty of perjury that the answers ty, or obtaining money or property by fraud in connectior o 20 years, or both.
/s/ Jero	me Kenneth Cabell, Jr.	/s/ Yo	landa Danielle Ca	abell
Jerome	Kenneth Cabell, Jr.	Yolan	da Danielle Cabe	<u> </u>
Signatur	e of Debtor 1	Signat	ture of Debtor 2	
Date F	ebruary 26, 2020	Date	February 26, 20	220
Did you a	ttach additional pages to Your Statement of I	inancial i	Affairs for Individua	als Filing for Bankruptcy (Official Form 107)?
■ No				
☐ Yes				
	ay or agree to pay someone who is not an att	orney to I	help you fill out ban	kruptcy forms?
■ No				
T Vac N	ame of Person Attach the Rankruntov Pe	atition Proj	narar's Notice Declar	ration, and Signature (Official Form 110)

United States Bankruptcy Court Eastern District of Michigan

In re		e Kenneth Cabe a Danielle Cabe			Case No.	
=			<u>v</u>	Debtor(s)	Chapter	7
				NT OF ATTORNEY FOR DEI UANT TO F.R.BANKR.P. 2010		
	The unde	ersigned, pursuan	t to F.R.Bankr.P. 2016(t	o), states that:		
1.			corney for the Debtor(s)			
2.		-	•	e Debtor(s) to the undersigned is:	: [Check one]	
	[X]	FLAT FEE	g		. []	
	A.	-	_	lation of and in connection with t		600.00
	B.	Prior to filing tl	his statement, received .			0.00
	C.	The unpaid bala	ance due and payable is			600.00
	[]	RETAINER				
	A.	Amount of reta	niner received			
	В.			etainer at an hourly rate of \$ nd expenses exceeding the amou		urly rate schedule.] Debtor(s) have
3.	\$ <u>335.</u>	.00 of the filing	g fee has been paid.			
4.		for the above-dis	sclosed fee, I have agree	d to render legal service for all as	spects of the bankrup	tcy case, including: [Cross out any
	A. B. C. D. E. F. G.	bankruptcy; Preparation and Representation of Reaffirmations; Redemptions; Other:	filing of any petition, so of the debtor at the meet of the debtor in adversar	on, and rendering advice to the dechedules, statement of affairs and ing of creditors and confirmation y proceedings and other conteste	I plan which may be not hearing, and any adj	required; journed hearings thereof;
-	D		fee agreement			
5.	By agree		fee agreement	sed fee does not include the follo	owing services:	
5.	The sour A. B.	xx XX		om: vages, compensation for services ding the identity of payor)	performed	
7.			shared or agreed to share ation paid or to be paid	, with any other person, other that except as follows:	an with members of t	he undersigned's law firm or
Dated:	Febru	ıary 26, 2020		/s	s/ Marshall D. Schi	ıltz
				M La 29 Se	ttorney for the Debto larshall D. Schultz aw Offices of Mars 9777 Telegraph Ro outhfield, MI 4803 48-559-6930 marsl	: P38040 shall D. Schultz oad, Suite 2203
Agreed:		rome Kenneth			s/ Yolanda Danielle	
	Jeron Debtor	ne Kenneth Cal	bell, Jr.		olanda Danielle C	abell
	レセリい	L		170	COLOI	

CHAPTER 7 BANKRUPTCY

LEGAL SERVICES REPRESENTATION AND FEE AGREEMENT

The undersigned individual(s) hereby retains attorney, Marshall D. Schultz, ("Attorney") to file and represent Client(s) in a Chapter 7 Bankruptcy case, and agrees to pay Attorney a MAXIMUM agreed fee of \$_800_____plus costs including, but not limited to, the \$335.00 (if not waived) filing fee (or current fee) required to be paid to the U.S. Bankruptcy Court and any fee(s) incurred in retrieving credit or asset reports. This fee shall cover ONLY the following pre-petition and (quantum meriut) post-petition legal services provided in connection with the case as described below:

Please note: If all fees are not paid in full prior to filing Client understands and specifically agrees that:

Any Portion of the fee paid pre-filing shall cover:

- (1) Pre-petition consultations and analysis with Client regarding the Bankruptcy law as it relates to their particular situation, review of client provided documentation and review of Credit Reports and Public Records or commercially available Asset Reports.
- (2) Preparation of Bankruptcy Petition and Schedules, review of prepared pleadings, office consultation(s) with the client to execute pleadings and filing Client's Chapter 7 Petition and Schedules based on the information provided and attested to by Client.

Any Portion of the fee paid post-filing shall be paid as QUANTUM MERIUT HOURLY post-petition services in an amount not to exceed the maximum agreed fee listed above and shall cover:

- (1) Amendments of Chapter 7 Schedules and pleadings, but NOT if the Client's failure to provide complete or accurate information to Attorney causes the needed amendment.
- (2) Attending the initial Section 341 Meeting of Creditor and any other adjourned 341-7 hearing scheduled by the Court.
- (3) Client communications, including, but not limited to, e-mail, mail, telephone and office consultations related to the Bankruptcy filing.
- (4) Trustee, U.S. Trustee and Creditor communications, including, but not limited to, e-mail, mail, telephone and office consultations related to the Bankruptcy filing.
- (5) Pre-court preparation consultation.

Client agrees and understands that the balance of any fee not paid prior to filing shall be paid prior to section 341 First Meeting of Creditors. The balance of this fee shall be construed as a fee for quantum meriut hourly post-petition services described above.

Client further agrees that any payments toward the maximum agreed fee made prior to filing Client's Chapter 7 case are not refundable based on the required preparatory work and responsibility assumed by Attorney.

The client also agrees that it is Client's sole obligation and responsibility to provide all of the necessary information with respect to personal information, income, assets, and liabilities required to accurately complete the bankruptcy petition and schedules.

Client agrees to pay Attorney \$300.00 per hour for legal services which are required or requested by the client to be provided by Attorney in addition to the above-described services covered by the maximum agreed fee.

In the event the maximum agreed fee is not paid in full prior to filing, Client agrees to pay for ONLY QUANTUM MERIUT POST-PETITION SERVICES ON AN HOURLY BASIS up to the amount of the maximum agreed fee.

The client specifically agrees that unless Attorney agrees in writing, ATTORNEY IS NOT OBLIGATED TO DEFEND ANY ADVERSARY PROCEEDING OR CONTESTED MATTER filed against Client contesting the discharge of any debt or contesting the granting of a Discharge to Client by the Bankruptcy Court. Client understands that before Attorney will agree to defend any Adversary Proceeding or Contested Matter, Attorney will require advance payment of an adequate retainer fee, and will require that Client agree to pay \$300.00 per hour for legal services to be provided in connection with such defense.

The client specifically agrees that the Attorney will NOT represent Client in any matter regarding the Client's relationship with any credit reporting agency or the information contained on any credit bureau report for a client or any co-debtor affected by client's bankruptcy or client's relationship with any utility companies or post-filing creditors.

Client understands that the Attorney may be faced with a calendar conflict on certain dates. Client consents to the appearance of associate counsel or of-counsel to conduct this hearing if the Attorney is faced with such a conflict. Client agrees that if Client is absent from the originally scheduled first meeting of creditors and a new hearing date is scheduled Client shall pay \$200.00 in fees for the additional post-petition court appearance.

Client understands that if Attorney recovers any pre-petition garnishment of wages or bank accounts the Attorney shall be compensated for this additional time and services in an amount equal to 33% of the monies recovered.

Client understands that one copy of the petition and schedules will be provided by the Attorney to the Client free of charge. Client agrees that reasonable retrieval and copying fee will be charged for any additional copies of the petition and or other documents requested by the Client that are contained in the Client's file.

Client agrees that all fees not paid prior to the filing of the Bankruptcy

Petition are fees for POST-PETITION services only.

By signing this Legal Services Representation and Fee Agreement, Client agrees to all the terms and conditions hereof and certifies that he and/or she has read and understands this entire Agreement

_/s/ Jerome Cabell, Jr	_/s/ Yoland Cabell
Client/Debtor	Client/Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
<u>+</u> \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Best Case Bankruptcy

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	Jerome Kenneth Cabell, Jr. Yolanda Danielle Cabell	Case No.	
		Debtor(s) Chapter 7	
Γhe ab		IFICATION OF CREDITOR MATRIX that the attached list of creditors is true and correct to the best of their knowledge.	
Date:	February 26, 2020	/s/ Jerome Kenneth Cabell, Jr. Jerome Kenneth Cabell, Jr.	-
		Signature of Debtor	
Date: _	February 26, 2020	/s/ Yolanda Danielle Cabell Yolanda Danielle Cabell	-
		Signature of Debtor	

Ability Recovery Servi Pob 4031 Wyoming, PA 18644

Ability Recovery Services, LLC PO Box 4262 Scranton, PA 18505

Ally PO Box 380902 Minneapolis, MN 55438-0902

Ally Financial P.o. Box 380901 Bloomington, MN 55438

American First Finance c/o Becket and Lee LLP PO Box 3002 Malvern, PA 19355-0701

AT&T PO BOX 5093 Carol Stream, IL 60197-5093

Beaumont Health System Business Center 750 Stephenson Highway PO BOX 5042 Troy, MI 48007-5042

Beaumont Home Medical Equipment 1200 Stephenson Hwy. Troy, MI 48083

Capital One Bank Usa N Po Box 30281 Salt Lake City, UT 84130

Cb Indigo/gf Po Box 4499 Beaverton, OR 97076 Cbm Services Inc 300 Rodd St. Midland, MI 48640

Comenitybank/victoria Po Box 182789 Columbus, OH 43218

Convergent Outsourcing Po Box 9004 Renton, WA 98057

Credence Resource Mana Po Box 2300 Southgate, MI 48195

Credit Acceptance Corp Po Box 5070 Southfield, MI 48086

Credit Control 5757 Phantom Drive Suite 330 Hazelwood, MO 63042-2429

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Davenport University 19499 Victor Parkway Livonia, MI 48152

David C. Brunell 39111 Six Mile Road Livonia, MI 48152

DTE Energy Attn: Bankruptcy Department One Energy Plaza 735 W.C.B. Detroit, MI 48226 Enhanced Recovery Co L Po Box 57547 Jacksonville, FL 32241

Fed Loan Serv Pob 60610 Harrisburg, PA 17106

First Access PO Box 89028 Sioux Falls, SD 57109

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

Ford Motor Credit Comp Pob 542000 Omaha, NE 68154

Genesis FS Card Services PO BOX 4477 Beaverton, OR 97076-4477

Henry Ford Pathology PO BOX 673835 Detroit, MI 48267-3835

Henry Ford Health System PO BOX 553920 Detroit, MI 48255

JP Morgan Chase Bank, N.A. Attn: Bankruptcy PO Box 182051 Columbus, OH 43224-0785

Loren Briggs 1199 South Sheldon Rd. Unit 65J Plymouth, MI 48170

LVNV Funding LLC PO Box 10497 Greenville, SC 29603 MEEMIC Insurance Company 1685 N. Opdyke Road Auburn Hills, MI 48326

Merchants & Medical Credit Corp. 6324 Taylor Dr. Flint, MI 48507-4685

Meridian Financial Services, USA 21 Overland Industrial Blvd., Bldg. 1 PO Box 1410 Asheville, NC 28802-1410

Meridian Financial Svc 1636 Hendersonville Rd Ste 135 Asheville, NC 28803

Michigan Center for Fertility 4700 Thirteen Mile Road Warren, MI 48092-4438

Michigan Department of Treasury Collection/Bankruptcy Unit P.O. Box 30168 Lansing, MI 48909

Michigan First Cu 27000 Evergreen Rd Southfield, MI 48076

Portfolio Recov Assoc 120 Corporate Blvd Ste 100 Norfolk, VA 23502

Rent-A-Canter 13314 E. Jefferson Detroit, MI 48215-2719

Rochester Anesthesia Services PO Box 6932 Carol Stream, IL 60197-6932

Ronald D. Kerwin MD PC 6330 Orchard Lake Rd. Suite 120 West Bloomfield, MI 48322 Ronald Kerwin MD 6330 Orchard Lake Road Suite 120 West Bloomfield, MI 48322

S E Mich St Emp Fedl C 17135 W 10 Mile Rd Southfield, MI 48075

Sierra Lending, LLC d/b/a Tall Grass Fin P.O. Box 647 Santa Ysabel, CA 92070

Syncb/jcp Po Box 965007 Orlando, FL 32896

Szuba & Associates, PLLC 40600 Ann Arbor Road, Ste 100 Plymouth, MI 48170

Tbom/milestone Po Box 4499 Beaverton, OR 97076

Tbom/total Crd Po Box 85710 Sioux Falls, SD 57118

Transworld Systems Inc. 500 Virginia Dr. Suite 514 Fort Washington, PA 19034

United Collection Bureau Inc. for YOUR CREDITORS 5620 Southwyck Blvd., Suite 206 Toledo, OH 43614

Universal Credit Servi 3582 Avon St Hartland, MI 48353

Visa PO Box 89028 Sioux Falls, SD 57109-9028 Walden University 1001 Fleet Street Baltimore, MD 21202

Webbank/fingerhut 6250 Ridgewood Road Saint Cloud, MN 56303

Weber & Olcese, PLC 3250 W. Big Beaver Road Ste. 124 Troy, MI 48084

Western Union PO Box 6036 Englewood, CO 80112

Westgate Vacation Villas, LTD 5601 Windhover Drive Orlando, FL 32819-7905